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24265 7590 12/29/2004

SCHERING-PLOUGH CORPORATION  
 PATENT DEPARTMENT (K-6-1, 1990)  
 2000 GALLOPING HILL ROAD  
 KENILWORTH, NJ 07033-0530

01/24/2005 HAL122 00000119 190365 10665005

01 FC:1501 1400.00 DA  
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I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (703) 746-4000, on the date indicated below.

**Palaiyur S. Kalyanaraman** (Depositor's name)  
 (Signature)  
**January 19, 2005** (Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/665,005	09/19/2003	Kamil Faruch	OC01625K	5836

TITLE OF INVENTION: NOVEL IMIDAZOPYRAZINES AS CYCLIN DEPENDENT KINASE INHIBITORS

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1400	\$300	\$1700	03/29/2005

EXAMINER	ART UNIT	CLASS-SUBCLASS
RAO, DEEPAK R	1624	514-249000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

- ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.  
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2. For printing on the patent front page, list

- (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,  
 (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

**Palaiyur S. Kalyanaraman**

2  
 3

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

**Schering Corporation**

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

**Kenilworth, New Jersey**

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☒ Corporation or other private group entity ☐ Government

4a. The following fee(s) are enclosed:

- ☒ Issue Fee  
☒ Publication Fee (No small entity discount permitted)  
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☒ The Director is hereby authorized to charge the required fee(s), or credit any overpayment, to Deposit Account Number **19-0365** (enclose an extra copy of this form).

5. Change in Entity Status (from status indicated above)

- ☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. ☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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Authorized Signature

*Palaiyur S. Kalyanaraman*

Date **01/19/2005**

Typed or printed name

**Palaiyur S. Kalyanaraman**

Registration No. **34,634**

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TO:	FAX NUMBER:
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FROM:	PHONE NUMBER:
Palaiyur S. Kalyanaraman	(908) 298-5068
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4	January 19, 2005

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NOTES/COMMENTS:

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In re Application of: Kamil Paruch *et al.*  
For Patent For: "Novel Imidazopyrazines as Cyclin Dependent Kinase Inhibitors"  
Group Art Unit: 1624  
Attorney Docket No.: OC01625K US/ Serial No.: 10/665,005  
Filed: 09/19/2003

Dear Examiner:  
Transmitted herewith are:

- Fax Cover Sheet – 1 Page
- Certification of Transmission under 37 CFR 1.8 – 1 Page
- Issue Fee Transmittal (Part B) – 1 Page in duplicate

Palaiyur S. Kalyanaraman  
Registered Representative  
Registration No. 34,634

PHONE: (908) 298-5068

FAX: (908) 298-5388

Attorney Docket No.: OC01625K  
Application No.: 10/665,005  
Filing Date: 09/19/2003  
First Named Inventor: Kamil Paruch

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